	Name of Credit Union	
	Name of Credit Onion	
	Address	
and the second s		
CERTIF	FICATE OF ELECTION OF DIRECTORS	
	AND	
DIRECTOR & COMMITTEE MEMBER SUBSCRIPTION TO OATH OF OFFICE		
and the second s	20	
	20	
	20	

## RHODE ISLAND CREDIT UNION CERTIFICATE OF ELECTION OF DIRECTORS

The undersigned	Secretary of
the	
	(Name of Credit Union)
located in	,Rhode Island, hereby
certifies that at a meeting of the	
	(Subscribers or Members, whichever is applicable)
of said Corporation, held on	
the following named persons were elect duly recorded in the records of said Corp	ted Directors thereof for the ensuing year, and that such election has been poration.
Name	Place of Residence
1.	
2.	
3.	
4	
5	
6.	
7.	
8	
9.	
10.	
11.	
12.	
13	
14.	
15.	
	Secretary-Clerk

## CREDIT UNION DIRECTORS & COMMITTEE MEMBERS OATH OF OFFICE

STATE OF RHODE ISLAND,	
County of}	
We, the undersigned Directors and Committee N	Members of the
(Name of 6	Credit Union)
swear that we will severally, so far as the duty devolve said Corporation, and that we will not knowingly violat	
Name	Place of Residence
1.	
2.	
3.	
4.	
5.	
6	
7.	
8.	
9.	
10.	
11.	
12.	
Supervisory Committee	
Supervisory Committee	
Supervisory Committee	
Credit Committee	
Credit Committee	
Credit Committee	
Credit Committee	
Subscribed and sworn to thisbefore the undersigned, a notary public in and for sa	day of20 aid State.
	Notary Signature